

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
(Case No. 13457US02)

In the Application of:

J.L. Creigh

U.S. Serial No.: 09/747,327

Filed: December 21, 2000

For: SYSTEM AND METHOD FOR
PROVIDING COMPATABILITY
BETWEEN DIFFERENT TRANS-
CEIVERS IN A MULTI-PAIR COM-
MUNICATION SYSTEM

Examiner: J.B. Logsdon

Group Art Unit: 2662

Conf. No.: 1292

Customer No.: 23446

VIA FACSIMILE

(703) 872-9306

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APR 19 2005

AMENDMENTMS: Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant submits this paper in response to the Office Action mailed on January 26, 2005.

Please amend the application as shown on the following pages.

Amendments to the Claims begin on page 2.

Remarks begin on page 6.

04/19/2005 USMALLS 00000002 130017 0974732/
01 P011201 600.00 DA

Appl. No. 09/747,327
Amdt. dated April 19, 2005

REMARKS

Applicant submits this Amendment in response to the Office Action mailed on January 26, 2005, in which claims 1-3 were rejected, claims 4-8 were objected to and claims 9-16 were allowed. Claims 1-3 are cancelled and claims 4-8 are amended herewith.

In Item 2 of the Office Action, claims 1-3 were rejected under 35 U.S.C. 102(e) as being anticipated by Trans (US 2002/0181633 A1). Although Applicant does not necessarily agree with this rejection, claims 1-3 are cancelled herewith in order to expedite the allowance of claims 4-16. Applicant reserves the right to prosecute claims 1-3 in a continuation application.

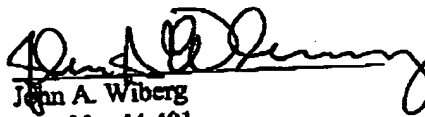
In Item 3 of the Office Action, claims 4-8 were objected to as being dependent upon a rejected base claim. Claims 4-6 and 8 have been amended to be in independent form, including all of the limitations of the base claim. Claim 7 is dependent on claim 6 and therefore believed to be allowable with this amendment. Thus, Applicant submits claims 4-8 are allowable.

Based on the foregoing, Applicant respectfully requests reconsideration and allowance of claims 4-16.

The Commissioner is hereby authorized to charge any additional required fees or credit any overpayment by this submission to the deposit account of McAndrews, Held & Malloy, Account No. 13-0017.

Date: April 19, 2005

Respectfully submitted,


John A. Wiberg
Reg. No. 44,401
Attorney for applicant

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09747327

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	16 minus 20 =	-
INDEPENDENT CLAIMS	3 minus 3 =	-
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	FEE
BASIC FEE	710.00
X\$18=	
X80=	
+270=	
TOTAL	710.00

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	16	20	= 0
Independent	3	3	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	

ADDIT. FEE

ADDIT. FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	13	20	= 0
Independent	6	3	= 3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X80=	600.00
+270=	
TOTAL	600.00

ADDIT. FEE

ADDIT. FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			=
Independent			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	

ADDIT. FEE

ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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